

NOTICE OF INDEPENDENT REVIEW DECISION

November 19, 2002

RE: MDR Tracking #: M2-02-1183-01
IRO Certificate #: 4326

____ has been certified by the Texas Department of Insurance (TDI) as an independent review organization (IRO). The Texas Workers' Compensation Commission (TWCC) has assigned the above referenced case to for independent review in accordance with TWCC Rule §133.308 which allows for medical dispute resolution by an IRO.

____ has performed an independent review of the proposed care to determine if the adverse determination was appropriate. In performing this review, relevant medical records, any documents utilized by the parties referenced above in making the adverse determination, and any documentation and written information submitted in support of the appeal was reviewed.

The independent review was performed by a ____ physician reviewer who is board certified in orthopedic surgery which is the same specialty as the treating physician. The ____ physician reviewer has signed a certification statement stating that no known conflicts of interest exist between him or her and any of the treating physicians or providers or any of the physicians or providers who reviewed the case for a determination prior to the referral to ____ for independent review. In addition, the reviewer has certified that the review was performed without bias for or against any party to this case.

Clinical History

This 49 year old female sustained a work-related injury on ____ when she was lifting a door on a loading dock and developed low back pain radiating down her right leg. The patient has undergone a MRI of the lumbar spine, a discogram and a post discogram CT scan. With continued complaints of low back pain, the treating physician has recommended that the patient undergo Intradiscal Electrothermal Therapy (IDET).

Requested Service(s)

IDET

Decision

It is determined that the IDET is medically necessary to treat this patient's condition.

Rationale/Basis for Decision

Based on the medical record documentation, the patient meets the inclusion criteria referenced in: "Effectiveness of Intradiscal Electrothermal Therapy in Increasing Functions and Reducing Chronic Low Back Pain in Selected Patients", Wisconsin Medical Journal 2002, Vol. 101, No. 1, pg. 31-34.

The medical record documentation reveals that an MRI performed on 07/27/00 indicated disc desiccation at L4-5 and L5-S1. Discography performed on 08/27/01 was reported to produce severe concordant pain at L4-5 and L5-S1 and moderate concordant pain at L3-L4. A post discogram CT scan on 08/27/01 revealed abnormal morphology at L4-5 and L5-S1, with normal morphology at L3-4. In addition, the patient's physical examination was consistent with discogenic pain syndrome and she has not responded adequately to non-operative care.

Therefore, it is determined that the IDET is medically necessary to treat this patient's condition.

This decision by the IRO is deemed to be a TWCC decision and order.

YOUR RIGHT TO REQUEST A HEARING

Either party to this medical dispute may disagree with all or part of the decision and has a right to request a hearing.

If disputing a spinal surgery prospective decision a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **10** (10) days of your receipt of this decision (20 Tex. Admin. Code 142.5 (c)).

If disputing other prospective medical necessity (preauthorization) decisions a request for a hearing must be in writing and it must be received by the TWCC Chief Clerk of Proceedings within **20** (twenty) days of your receipt of this decision (28 Tex. Admin Code 148.3).

This Decision is deemed received by you 5 (five) days after it was mailed (28 Tex. Admin Code 102.4(h) or 102.5(d)). A request for hearing should be sent to: Chief Clerk of Proceedings, Texas Workers' Compensation Commission, P.O. Box 40669, Austin, Texas, 78704-0012. **A copy of this decision should be attached to the request.**

The party appealing the decision shall deliver a copy of its written request for a hearing to all other parties involved in the dispute (Commission Rule 133.308 (t)(2)).

Sincerely,